## **SWORN AFFIDAVIT**

Location of Incident:	Date:	100		Time:
	01	NOU :	2011	1930-2000 hrs
Summary of Statement(s):		-		
A STATE OF THE STA		1		
Refer to State	ne	ut		
			-	
I		- دیدادسها	tata sa f	allows. I have send the street
summary and/or attached statement(s) in its entir	ety, revi	nereby s ewed it for	iate as I accuracy	ollows: I have read the above and been given an opportunity
to make corrections and additions to the statemen	t. I swe	ear and affir	m, under	penalties provided by law, that
e summary a	movor at	rached crafe	ment is fr	rue and accurate
(Signature of person making statement)			name) . / .	/ 11
				/-11
State of Illinois		(Date)		
County of Cook				
(x) 0(1/1)				
XXX VIII		-		
(Notary Public)		(Deput	y Clerk)	
Signed and sworn before me on this		-		
04th day of NOV , 2011		(Print)	name)	
- day or 700 0 , 20 11		Minima		
		(Date)		
		A with a first	A.T	27
OFFICIAL SEAL		Attach	ment No.	
DANIEL J KOBEL  NOTARY PUBLIC - STATE OF ILLINOIS  MY COMMISSION EXPOSES		Compl	aint Log	No
MY COMMISSION EXPIRES:01/20/15				
Created 4-5-11				